



M.J.Hickey Plant Hire Limited

Demolition Plant Hire Site Clearance Muck Away

Unit 11 Slough Business Centre Bristol Way Slough Berkshire SL1 3TD
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Time Sheet

No: 46040

Please submit weekly via post or timesheets@hickeyplanthire.co.uk

On hire to: Buxted.
Site Address: Queens Avenue,
Aldershot GU11 2BT.

Driver: _____
Week Ending: Fleet No: 201.
Machine: 2x55

Day	Date	Hours Worked	Remarks	Equipment
Monday			<u>Delivery.</u>	300mm <input type="checkbox"/>
Tuesday				450mm <input checked="" type="checkbox"/>
Wednesday			<u>2x55 - 4x buckets.</u>	600mm <input checked="" type="checkbox"/>
Thursday			<u>- fuel tank - full.</u>	750mm <input type="checkbox"/>
Friday			<u>- all in working order.</u>	900mm <input type="checkbox"/>
Saturday				1050mm <input type="checkbox"/>
Sunday				Dig Bkt <input checked="" type="checkbox"/>
Total			<u>CONF - 9201</u>	Ditch <input checked="" type="checkbox"/>

Drivers Bonus - £ _____

No allowances can be made for bad weather conditions. All hires are subject to standard C.P.A conditions. On rubber tyred plant - punctures are the hirer's responsibility. All glass breakages are chargeable. Minimum period of hire is nine hours per day.

The time and hours shown hereon are correct and charges invoiced on that basis will be accepted by the hirer. For and on behalf of CONTRACTOR (Hirer):

SIGNATURE: [Signature] DATE: 10.11.22 OPERATORS SIGNATURE: [Signature]

Record Of Weekly Inspection

	Serviceable	Unserviceable		Serviceable	Unserviceable
Tyres/Tracks	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Lights	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Oil levels	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Attachments	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Quick hitch	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Hydraulic rams	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mirrors	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Windows	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Pins	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Greasing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Notice to Operator: This section must be completed on Friday each week. Any defect that affects safety should be reported to the office immediately.

I confirm that I have completed a weekly inspection of the items listed above and noted any defects:

OPERATORS SIGNATURE: _____